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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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| Applicant: | Robert K. Naviaux | Art Unit: | 1614 |
| Application No.: | 09/889,251 | Examiner: | P. Spivak |
| Filed: | November 1, 2001 | Conf. No. | 9760 |
| Title: | METHOD OF TREATMENT OF MITOCHONDRIAL DISORDERS | | |

Mail Stop: AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL SHEET

Sir:

Transmitted herewith for the above-identified application please find:

- (1) Response to the Office Action (11 pgs.);
- (2) Terminal Disclaimer (3 pgs.);
- (3) Information Disclosure Statement (2 pgs.);
- (4) Form PTO 1449;
- (5) Check No. 578773 in the amount of \$310.00; and
- (6) Return Receipt Postcard.

Check No. 578773 in the amount of \$310.00 is enclosed for a Terminal Disclaimer fee and submission of an Information Disclosure Statement fee. The Commissioner is hereby authorized to charge any other fees that may be required by this paper or credit any overpayment to Deposit Account No. 07-1896. A duplicate copy of this Transmittal Letter is attached.

Respectfully submitted,

Date: August 10, 2005

for *Victor Rejzini reg. 45,099*
 Lisa A. Haile, J.D., Ph.D.
 Registration No. 38,347
 Telephone: (858) 677-1456
 Facsimile: (858) 677-1465

DLA PIPER RUDNICK GRAY CARY US LLP
4365 Executive Drive, Suite 1100
San Diego, California 92121-2133
USPTO Customer No. 28213

CERTIFICATION UNDER 37 CFR §1.8

I hereby certify that the documents referred to as enclosed herein are being deposited with the United States Postal Service as first class mail on August 10, 2005, in an envelope addressed to: Mail Stop, AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Cara Grifone 8/10/2005
Cara Grifone